

INVENTOR INFORMATION

Inventor One Given Name:: Wolfgang  
Family Name:: Buchalla  
Name Suffix:: Dr.  
Postal Address Line One:: 702 Lockefield Court #C  
City:: Indianapolis  
State or Province:: Indiana  
Country:: US  
Postal or Zip Code:: 46202  
City of Residence:: Indianapolis  
State or Province of Residence:: Indiana  
Country of Residence:: US  
Citizenship Country:: US  
Inventor Two Given Name:: Aine M  
Family Name:: Lennon  
Name Suffix:: Dr.  
Postal Address Line One:: 702 Lockefield Court #C  
City:: Indianapolis  
State or Province:: Indiana  
Country:: US  
Postal or Zip Code:: 46202  
City of Residence:: Indianapolis  
State or Province of Residence:: Indiana  
Country of Residence:: US  
Citizenship Country:: US

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 000832  
Fax One:: 219-460-1700  
Electronic Mail One:: mdschwar@bakerd.com

APPLICATION INFORMATION

Title Line One:: LUMINESCENCE ASSISTED CRIES EXCAVATION  
Total Drawing Sheets:: 5  
Formal Drawings?:: No  
Application Type:: Utility  
Docket Number:: ARE0005  
Secrecy Order in Parent Appl.?:: No

REPRESENTATIVE INFORMATION

Representative Customer Number:: 832  
Registration Number One:: 26280  
Registration Number Two:: 24871  
Registration Number Three:: 40181  
Registration Number Four:: 44326

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Registration Number Five:: 32816  
Registration Number Six:: 46756  
Registration Number Seven:: 46644  
Registration Number Eight:: 33687  
Registration Number Nine:: 18778  
Registration Number Ten:: 32230  
Registration Number Eleven:: 39679  
Registration Number Twelve:: 40746  
Registration Number Thirteen:: 32722  
Registration Number Fourteen:: 37370

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